Bankruptcy2009 ©1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main B1 (Official Form 1) (1/08) Document Page 1 of 55

United States Bankruptcy Court Northern District of Illinois			Voluntar	y Petition	
Name of Debtor (if individual, enter Last, First, Middle): Garrison, James Bradley		Name of Join	t Debtor (Spouse) (Last, Firs	st, Middle):	
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): None	years		mes used by the Joint Debtoried, maiden, and trade name	•	3
Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all): 7511	ver I.D. (ITIN) No./Complete EIN	Last four digit (if more than o		Taxpayer I.D. (IT)	(N) No./Complete EIN
Street Address of Debtor (No. and Street, City, a 476 Althea Street	and State)	Street Address	ss of Joint Debtor (No. and S	treet, City, and St	ate
Machesney Park, IL	ZIPCODE 61115	1			ZIPCODE
County of Residence or of the Principal Place of	Business:	County of Re	esidence or of the Principal P	lace of Business:	
Winnebago Mailing Address of Debtor (if different from stre	et address):	Mailing Add	ress of Joint Debtor (if differ	ent from street add	dress):
	ZIPCODE	-			ZIPCODE
Location of Principal Assets of Business Debtor	(if different from street address a	bove):			ZIPCODE
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Filling Fee (Check one b Filling Fee to be paid in installments (Application for the court's consideration to pay fee except in installments. Rule 10060 Filling Fee waiver requested (applicable to chattach signed application for the court's consideration for the c	able to individuals only) Must at on certifying that the debtor is un (b). See Official Form No. 3A. apter 7 individuals only). Must	y ble) anization d States e Code) Check D D Check able A A	the Petitio The P	U.S.C. by an for a household Debtors defined in 11 U.S.C. as defined in 11 U.S.C. as the liquidated detare less than \$2,19 petition. solicited prepetition	one box) etition for of a Foreign ding etition for of a Foreign of a Foreign occeding Debts are primarily business debts C. § 101(51D) U.S.C. § 101(51D) ots (excluding debts 0,000 on from one or
Statistical/Administrative Information Debtor estimates that funds will be available for dist	tribution to unsecured creditors.				THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that, after any exempt property is edistribution to unsecured creditors.	excluded and administrative expenses	paid, there will be	e no funds available for		
Estimated Number of Creditors 1-49 50-99 100-199 200-999	1000- 5000 5,001- 10,000	10,001- 25,000	25,001- 50,001- 50,000 100,000	Over 100,000	
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion	
Estimated Liabilities \[\begin{array}{c cccc} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$1,000,001 \$10,000,001 to \$10 to \$50	\$50,000,001 to \$100	\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion	

Adobe PDF
30564 -
•
ver. 4.4.9-735
Inc.,
e Software,
Hop
Ne.
-2009,
©1991
Bankruptcy2009 @

B1 (Official Tag			30 Desc Main Page 2			
Voluntary Per (This page must be	tition Document c completed and filed in every case)	Page 7 of 55 Name of Debtof(s): James Bradley Garrison				
	All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)				
Location Where Filed:	NONE	Case Number:	Date Filed:			
Location Where Filed:	N.A.	Case Number:	Date Filed:			
	nkruptcy Case Filed by any Spouse, Partner	•	· · · · · · · · · · · · · · · · · · ·			
Name of Debtor:	NONE	Case Number:	Date Filed:			
District:		Relationship:	Judge:			
10K and 10Q) with	Exhibit A f debtor is required to file periodic reports (e.g., forms the Securities and Exchange Commission pursuant to of the Securities Exchange Act of 1934 and is requesting r 11)	Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).				
Exhibit A i	s attached and made a part of this petition.	X /s/ Brian K. Larkin Signature of Attorney for Debtor(s)	July 1, 2009 Date			
_	n or have possession of any property that poses or is alleged whibit C is attached and made a part of this petition.	d to pose a threat of imminent and identifiable h	arm to public health or safety?			
Exhibit D If this is a joint per	by every individual debtor. If a joint petition is filed, each completed and signed by the debtor is attached and made a	spouse must complete and attach a separate Exla part of this petition.	nibit D.)			
		arding the Debtor - Venue ny applicable box)				
ಠ	Debtor has been domiciled or has had a residence, princi immediately preceding the date of this petition or for a lo	ipal place of business, or principal assets in this	District for 180 days strict.			
	There is a bankruptcy case concerning debtor's affiliate,	general partner, or partnership pending in this D	Pistrict.			
	Debtor is a debtor in a foreign proceeding and has its prin or has no principal place of business or assets in the Unit court] in this District, or the interests of the parties will b	ted States but is a defendant in an action or proc	eeding [in federal or state			
		ides as a Tenant of Residential Propoplicable boxes)	erty			
	Landlord has a judgment for possession of debtor's resid	lence. (If box checked, complete the following.)			
	(Name of	landlord that obtained judgment)				
	(Address	of landlord)				
	Debtor claims that under applicable non bankruptcy law, entire monetary default that gave rise to the judgment for	, there are circumstances under which the debtor				
	Debtor has included in this petition the deposit with the operiod after the filing of the petition.					
	Debtor certifies that he/she has served the Landlord with	this certification. (11 U.S.C. § 362(1)).				

be PDF	
5 - 30564 - Ado	
nc., ver. 4.4.9-735	
Hope Software, Is	
991-2009, New l	
Bankruptcy2009 ©1	

Case 09-72810 Doc 1 F	Filed 07/06/09		ered 07/06/09 16:49:30	Desc Main
B1 (Official Form 1) (1/08)	Document		3 01 55	Page 3
Voluntary Petition	2222)		of Debtor(s):	
(This page must be completed and filed in every	y case) Signa		es Bradley Garrison	
		Tures	~	
Signature(s) of Debtor(s) (Individual	•		Signature of a Foreign R	epresentative
I declare under penalty of perjury that the information pro is true and correct.	covided in this petition			
[If petitioner is an individual whose debts are primarily c		I decla	re under penalty of perjury that the infor	rmation provided in this petition
has chosen to file under chapter 7] I am aware that I may chapter 7, 11, 12, or 13 of title 11, United States Code, un			and correct, that I am the foreign represeding, and that I am authorized to file this	
available under each such chapter, and choose to proceed	d under chapter 7.	1 *		s petition.
[If no attorney represents me and no bankruptcy petition petition] I have obtained and read the notice required by	11 U.S.C. § 342(b).	(Check	only one box.)	
I request relief in accordance with the chapter of title 11, Code, specified in this petition.			I request relief in accordance with chapt Code. Certified copies of the documents r attached.	
			Pursuant to 11 U.S.C.§ 1511, I request relititle 11 specified in this petition. A crecognition of the foreign main proceeding	ertified copy of the order granting
X /s/ James Bradley Garrison			1	
Signature of Debtor		X		
X		(S	ignature of Foreign Representative)	
Signature of Joint Debtor				
		(F	rinted Name of Foreign Representative))
Telephone Number (If not represented by attorney)				
July 1, 2009			Date)	
Date		΄.	Date)	
Signature of Attorney*				
X /s/ Brian K. Larkin			Signature of Non-Attorney Po	etition Preparer
Signature of Attorney for Debtor(s)			are under penalty of perjury that: 1) I am	
BRIAN K. LARKIN			ned in 11 U.S.C. § 110, 2) I prepared the provided the debtor with a copy of the	
Printed Name of Attorney for Debtor(s)		and in	formation required under 11 U.S.C. § 11	10(b), 110(h), and 342(b); and,
		setting	ales or guidelines have been promulgate g a maximum fee for services chargeable	by bankruptcy petition
Firm Name One Court Place- Suite 301		prepar	ers, I have given the debtor notice of the ent for filing for a debtor or accepting a	e maximum amount before any
Address			ed in that section. Official Form 19 is at	
Rockford, IL 61101				
		Printe	d Name and title, if any, of Bankruptcy	Petition Preparer
815-964-4601				
Telephone Number			Security Number (If the bankruptcy pe	
<u>July 1, 2009</u> Date			he Social Security number of the officer or of the bankruptcy petition preparer.) (
*In a case in which § 707(b)(4)(D) applies, this signature a certification that the attorney has no knowledge after an in			1 71 1	<u>.</u> ,
information in the schedules is incorrect.	iquity unat une	Addre	ess	
Signature of Debtor (Corporation/Part	tnership)	1		_
I declare under penalty of perjury that the information p	provided in this petition	v		
is true and correct, and that I have been authorized to file behalf of the debtor.	e this petition on	X		
The debtor requests relief in accordance with the chapte	ar of title 11	<u></u>		
United States Code, specified in this petition.	1 of title 11,	Date		
X Signature of Authorized Individual		perso	ature of bankruptcy petition preparer or on, or partner whose Social Security nur	mber is provided above.
		assis	es and Social Security numbers of all ot ted in preparing this document unless th n individual:	her individuals who prepared or le bankruptcy petition preparer is
Printed Name of Authorized Individual			ore than one person prepared this docum forming to the appropriate official form f	
Title of Authorized Individual		A ban	akruptcy petition preparer's failure to comply	with the provisions of title 11
Date		and th	he Federal Rules of Bankruptcy Procedure mo sonment or both 11 U.S.C. §110; 18 U.S.C. §	ay result in fines or

B1 D (Official Form 1, Exhibit D) (12/08)

UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re	James Bradley Garrison	Case No.
	Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

B1 D (Official Form 1, Exh. D) (12/08) – Cont.

Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
☐ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credi

I certify under penalty of perjury that the information provided above is true and correct.

counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

Signature of Debtor: /s/ James Bradley Garrison

JAMES BRADLEY GARRISON

Date: ___July 1, 2009

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

B6A (Official FCASA 09272810	Doc 1	Filed 07/06/09	Entered 07/06/09 16:49:30	Desc Main
2011 (Ollietti 1 01111 011) (12/07)		Document	Page 7 of 55	

In re	James Bradley Garrison	Case No.	
	Debtor	(If known)	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
	Tot	_	0.00	

Bankruptcy2009 ©1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

(Report also on Summary of Schedules.)

B6B (Official Forms 6B	A	9 _{2/07}	810
------------------------	---	-------------------	-----

c 1 Filed 07/06/09 Document Entered 07/06/09 16:49:30 Page 8 of 55

Desc Main

In re	James Bradley Garrison
	_ tunies Brudiej Surrison

Debtor

Case No. _____(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
Cash on hand. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	Savings Account Members Alliance Credit Union Checking Account Woodforest Bank		3.00
3. Security deposits with public utilities, telephone companies, landlords, and others. 4. Household goods and furnishings, including audio, video, and computer equipment.	X	Misc HHG, no item over \$400 In debtors possession		60.00
Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. Wearing apparel.	X	Clothing In debtors possession		50.00
7. Furs and jewelry. 8. Firearms and sports, photographic, and other hobby equipment.	X	Guitar In debtors possession		400.00
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 10. Annuities. Itemize and name each issuer.	X			

Ы
8
호
Ą
ı,
\(\frac{7}{4} \)
050
30
1
2
73
6
4
4.
Η.
×
·;
Ξ
as.
æ
≥
듄
Š
B
유
Τ
è
ž
ó,
8
Ġ
91
5
0
6
60
Š
5,
ď
互
'n.
m

In re	James Bradley Garrison	Case No.
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	X			
Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. 25. Automobiles, trucks, trailers, and other	X	1985 Honda HL600R		500.00
vehicles and accessories.		1703 Holida Hilotott		300.00

Filed 07/06/09 Document

Entered 07/06/09 16:49:30 Desc Main Page 10 of 55

(If known)

In re	James Bradley Garrison

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
		In debtors possession		
		1994 Ford Ranger		400.00
		In debtors possession		400.00
		-		
		2003 Honda Shadow		1,500.00
		In debtors possession		
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
	1	0 continuation sheets attached Tot.		\$ 3,213.00

Document

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Page 11 of 55

(If known)

B6C (Official)	Form	6C)	(12/07)

In re James Bradley Garrison Case No. ___ **Debtor**

~ ~		~	
SCHEDULE C -	PROPERTY CLA	IMED AS EXEMPT	

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

☐ 11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Savings Account	735 I.L.C.S 5§12-1001(b)	3.00	3.00
Clothing	735 I.L.C.S 5§12-1001(a)	50.00	50.00
Guitar	735 I.L.C.S 5§12-1001(b)	400.00	400.00
1985 Honda HL600R	735 I.L.C.S 5§12-1001(b)	500.00	500.00
1994 Ford Ranger	735 I.L.C.S 5§12-1001(b)	400.00	400.00
2003 Honda Shadow	735 I.L.C.S 5§12-1001(c)	1,500.00	1,500.00
Misc HHG, no item over \$400	735 I.L.C.S 5§12-1001(b)	60.00	60.00
Checking Account	735 I.L.C.S 5§12-1001(b)	300.00	300.00

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 12 of 55

B6D (Official Form 6D) (12/07)

In re _	James Bradley Garrison		Case No.	
	Debtor	,	(If known)	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

 $\boxed{\mathbf{V}}$ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.								
			MALTIE ¢	-				
ACCOUNT NO.	+		VALUE \$	\vdash		Н		
	┨							
			VALUE \$					
ACCOUNT NO.	_							
			VALUE \$	┨				
0 continuation sheets attached	_			Sub	tota		\$ 0.00	\$ 0.00
continuation sheets attached			(Total o	7	[otal	ı >	\$ 0.00	\$ 0.00
	(Use only on last page)							

(Report also on (If applicable, reposition of Schedules) also on Statistical

(If applicable, report s) also on Statistical Summary of Certain Liabilities and Related Data.)

Bankruptcy2009 ©1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 13 of 55

B6E (Official Form 6E) (12/07)

In re	James Bradley Garrison	Case No.
	Debtor	 (if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

V	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TY	PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 14 of 55

B6E (Official Form 6E) (12/07) - Cont.

Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

In re	Case No(if known)
	(II Kilowii)
Certain farmers and fishermen	
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, again	ast the debtor, as provided in 11 U.S.C. § 507(a)(6).
Deposits by individuals	
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of pr that were not delivered or provided. 11 U.S.C. § 507(a)(7).	roperty or services for personal, family, or household use
☐ Taxes and Certain Other Debts Owed to Governmental Units	
Taxes, customs duties, and penalties owing to federal, state, and local governmental u	units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Institution	
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supr	ervision. Comptroller of the Currency or Board of
Governors of the Federal Reserve System, or their predecessors or successors, to maintain U.S.C. § 507 (a)(9).	
Claims for Death or Personal Injury While Debtor Was Intoxicated	
Claims for death or personal injury resulting from the operation of a motor vehicle or lcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	vessel while the debtor was intoxicated from using
* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter wi adjustment.	ith respect to cases commenced on or after the date of

) ___ continu

_ continuation sheets attached

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main

Document

Page 15 of 55

B6F (Official Form 6F) (12/07)

In re	James Bradley Garrison ,	Case No.	
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Consideration: Credit card debt				
Bank of America c/o Associated Recovery Systems P.O. Box 469046 Escondido, CA 92046-9045							4,819.01
ACCOUNT NO. 7956	+		Consideration: Medical services	+		Н	
Beloit Clinic 1905 Huebbe Parkway Beloit, WI 53511							240.75
ACCOUNT NO. 2004111500071	+		Consideration: Medical services	+			
Beloit Clinic c/o United Credit 15 N. Lincoln Elkhorn, WI 53121							121.00
ACCOUNT NO. 7170660000050385	+		Consideration: Unknown	+		Н	
Creditors Protection S 202 W State St Ste 300 Rockford, IL 61101						X	75.00
4 continuation sheets attached	<u>.</u>		L	Subt	otal	>	\$ 5,255.76
continuation sheets attached					'otal		\$

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Entered 07/06/09 16:49:30 Desc Main Filed 07/06/09 Case 09-72810 Doc 1 Page 16 of 55 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	James Bradley Garrison		Case No.	
	Debtor	,		(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

1130 Northchase Parkway, Suite 150 Marietta, GA 30067 ACCOUNT NO. 4241632 Fort Medical Group c/o Margraf Collectn Agene 112 N Main St Fort Atkinson, WI 53538 ACCOUNT NO. GE Money 40 Meyer & NJUS 134 N. LaSalle Street, Suite 1840 Chicago, IL 60602 ACCOUNT NO. 601250690072 Gemb/american Honda Po Box 981439 El Paso, TX 79998 Consideration: Credit card debt Consideration: Revolving Charge Account ACCOUNT NO. Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Sheet no. 1_ of 4_ continuation sheets attached Subtotal > \$ 27,416,000	CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
c/o Focus Receivables Management 1130 Northchase Parkway, Suite 150 Marietta, GA 30067 CCOUNT NO. 4241632 Fort Medical Group c/o Margraf Collectn Agenc 112 N Main St Fort Atkinson, WI 53538 CConsideration: Medical services 362.00 Consideration: Medical services Consideration: Credit card debt GE Money 40 Meyer & NJUS 134 N. LaSalle Street, Suite 1840 Chicago, IL 60602 CConsideration: Revolving Charge Account Gemb/american Honda Po Box 981439 El Paso, TX 79998 Consideration: Collision Damages Consideration: Collision Damages 10,000.00 Sheet no. 1 of 4continuation sheets attached Subtotal 5 27,416.00	ACCOUNT NO. 601100768521			Consideration: Credit card debt				
Fort Medical Group c/o Margraf Collectn Agenc 112 N Main St Fort Atkinson, WI 53538 ACCOUNT NO. GE Money 40 Meyer & NJUS 134 N. LaSalle Street, Suite 1840 Chicago, IL 60602 Consideration: Revolving Charge Account Gemb/american Honda Po Box 981439 El Paso, TX 79998 Consideration: Credit card debt 4,568.00 Consideration: Revolving Charge Account Gemb/american Honda Po Box 981439 El Paso, TX 79998 Consideration: Collision Damages Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Sheet no. 1 of 4 continuation sheets attached Subtotal \$ \$ 27,416.00	c/o Focus Receivables Management 1130 Northchase Parkway, Suite 150							7,918.00
c/o Margraf Collectn Agenc 112 N Main St Fort Atkinson, WI 53538 ACCOUNT NO. GE Money 40 Meyer & NJUS 134 N. LaSalle Street, Suite 1840 Chicago, IL 60602 Consideration: Revolving Charge Account Gemb/american Honda Po Box 981439 El Paso, TX 79998 Consideration: Revolving Charge Account Consideration: Collision Damages ACCOUNT NO. Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Sheet no. 1 of 4 continuation sheets attached Subtotal > \$ 27.416.00	ACCOUNT NO. 4241632	T		Consideration: Medical services				
GE Money 40 Meyer & NJUS 134 N. LaSalle Street, Suite 1840 Chicago, IL 60602 ACCOUNT NO. 601250690072 Gemb/american Honda Po Box 981439 El Paso, TX 79998 Consideration: Revolving Charge Account Gemb/american Honda Po Box 981439 El Paso, TX 79998 Consideration: Collision Damages Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Sheet no. 1 of 4 continuation sheets attached Subtotal \$\Bigs 27,416.00	c/o Margraf Collectn Agenc 112 N Main St							362.00
4,568.00 ACCOUNT NO. 601250690072 Gemb/american Honda Po Box 981439 El Paso, TX 79998 ACCOUNT NO. Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Consideration: Revolving Charge Account Consideration: Collision Damages 10,000.00 Sheet no. 1 of 4continuation sheets attached 4,568.00 Consideration: Collision Damages	ACCOUNT NO.	╁		Consideration: Credit card debt	\top			
Gemb/american Honda Po Box 981439 El Paso, TX 79998 ACCOUNT NO. Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Consideration: Collision Damages 10,000.00 Sheet no. 1 of 4 continuation sheets attached Subtotal \$\\$ 27,416.00	40 Meyer & NJUS 134 N. LaSalle Street, Suite 1840							4,568.00
Po Box 981439 El Paso, TX 79998 ACCOUNT NO. Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Sheet no. 1 of 4 continuation sheets attached Consideration: Collision Damages 10,000.00	ACCOUNT NO. 601250690072	t		Consideration: Revolving Charge Account	+		T	
Hertz Rental Car 2 Airport Circle Rockford, IL 61109 Sheet no. 1 of 4 continuation sheets attached Subtotal \$\sim \text{27.416.00}	Po Box 981439							4,568.00
2 Airport Circle Rockford, IL 61109 Sheet no. 1 of 4 continuation sheets attached \$27.416.00	ACCOUNT NO.	\dagger		Consideration: Collision Damages	+		${\mathsf T}$	
	2 Airport Circle							10,000.00
	Sheet no. 1 of 4 continuation sheets atta to Schedule of Creditors Holding Unsecured	ched			Sub	tota	ıl≻	\$ 27,416.00

Nonpriority Claims

Total➤ \$

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Entered 07/06/09 16:49:30 Desc Main Filed 07/06/09 Case 09-72810 Doc 1 Page 17 of 55 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	James Bradley Garrison	Case No.	
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			Consideration: Overdraft Charge				
Members Alliance Credit Union 2550 S. Alpine Road Rockford, IL 61108							300.00
ACCOUNT NO. 8300660000034511	+		Consideration: Medical services	\dagger			
Orthopedic Associates c/o Creditors Protection S 202 W State St Ste 300 Rockford, IL 61101							504.00
ACCOUNT NO. X90744	\dagger		Consideration: Medical services	T			
OSF Lifeline Ambulance, LLC c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108	1						496.00
ACCOUNT NO. X14768	\dagger		Consideration: Medical services	T			
Rockford E.A.S. c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108							138.00
ACCOUNT NO. 9290760000233075 Rockford Health Physicians c/o Creditors Protection S 202 W State St Ste 300 Rockford, IL 61101			Consideration: Medical services				358.00
Sheet no. 2 of 4 continuation sheets at	tached			Sub	tota	l≯	\$ 1,796.00
to Schedule of Creditors Holding Unsecured				7	Coto		¢

Nonpriority Claims

Total➤ \$

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Case 09-72810 Doc 1 Page 18 of 55 Document

B6F (Official Form 6F) (12/07) - Cont.

In re	James Bradley Garrison		Case No.	
	Debtor	,		(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Rockford Health System c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108			Consideration: Medical services				11,441.00
Rockford Health System c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108			Consideration: Medical services				955.00
Rockford Health Systems c/o Aba 300 1/2 South 2nd Clinton, IA 52733			Consideration: Medical services				444.00
ACCOUNT NO. 1165299 Rockford Health Systems c/o Aba 300 1/2 South 2nd Clinton, IA 52733			Consideration: Medical services				373.00
ACCOUNT NO. 1165279 Rockford Health Systems c/o Aba 300 1/2 South 2nd Clinton, IA 52733			Consideration: Medical services				216.00
Sheet no. 3 of 4 continuation sheets at to Schedule of Creditors Holding Unsecured	tached			Sub	tota	l >	\$ 13,429.00

Nonpriority Claims

Total ➤ \$

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 19 of 55

B6F (Official Form 6F) (12/07) - Cont.

In re	James Bradley Garrison	Case No.	
	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
		Consideration: Medical services				
						2,561.00
		Consideration: Medical services	+			
						75.00
\top		Consideration: Credit card debt	\top			
						4,780.32
	CODEBTOR	#	Consideration: Medical services Consideration: Medical services			

Sheet no. 4 of 4 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ► \$ 7,416.32 Total ► \$ 55,313.08

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Filed 07/06/09 Document

Entered 07/06/09 16:49:30 Desc Main Page 20 of 55

In re	James Bradley Garrison	Case No.	
	Debtor		(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

\checkmark	Check this box if debtor has no executory contracts or unexpired leases
--------------	---

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

Ξ
ē
ಕ
묫
7
4
56
3056
ï
735
ξ.
4 ;
4.
er.
ver.
.:
ä
Τ,
E
š
₫
Š
ō
0
Ξ
ě
ž
ά,
ğ.
200
÷
8
0
\sim
8
8
5
ruptc
2
ank
32
щ

In re	James Bradley Garrison	Case No.	
	Debtor		(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

V	Check this	box if	debtor	has	no	codebtors

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Debtor's Marital

In re_	James Bradley Garrison	Case	
	Debtor	(if known)	

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

DEPENDENTS OF DEBTOR AND SPOUSE

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Status: Single	RELATIONSHIP(S): No dependents			AGE(S):		
Employment:	DEBTOR			SPOUSE		
Occupation	Rosecrance, Inc.					
Name of Employer	3815 Harrison Avenue					
How long employed	1 month					
Address of Employer	Rockford, IL 61108			N.A.		
NCOME: (Estimate of averag	e or projected monthly income at time case filed)		Г	EBTOR	SPO	OUSE
. Monthly gross wages, salar			\$	1,691.27	\$	N.A.
(Prorate if not paid mont	hly.)		Ψ		·	
2. Estimated monthly overtim	e		\$_	0.00	\$	N.A.
3. SUBTOTAL			\$	1,691.27	\$	N.A
LESS PAYROLL DEDUCT	TIONS					
a. Payroll taxes and socia	al security		\$_	330.65	\$	N.A.
b. Insurance	a security		\$_	0.00	\$	N.A.
c. Union Dues			\$_	0.00	\$	N.A.
d. Other (Specify:)	\$_	0.00	\$	N.A.
S. SUBTOTAL OF PAYROLI	L DEDUCTIONS		\$_	330.65	\$	N.A.
5 TOTAL NET MONTHLY	TAKE HOME PAY		\$_	1,360.62	\$	N.A.
7. Regular income from opera	ation of business or profession or farm		\$_	0.00	\$	N.A.
(Attach detailed statement)						
3. Income from real property			\$_	0.00	\$	N.A.
Interest and dividends			\$_	0.00	\$	N.A
	or support payments payable to the debtor for the		\$	0.00	\$	N.A.
debtor's use or that of depe			Ψ_	0.00	Φ	IV.A.
11. Social security or other go			\$_	0.00	\$	N.A
12. Pension or retirement inco	ome		\$_	0.00	\$	N.A
13. Other monthly income			\$_	0.00	\$	N.A.
(Specify)			\$_	0.00	\$	N.A.
14. SUBTOTAL OF LINES 7	THROUGH 13		\$_	0.00	\$	N.A
5. AVERAGE MONTHLY I	NCOME (Add amounts shown on Lines 6 and 14)		\$_	1,360.62	\$	N.A.
16. COMBINED AVERAGE from line 15)	MONTHLY INCOME (Combine column totals			\$1	1,360.62	-
110111 1111c 13)		(Report also on Su				
		on Statistical Sum	ımary o	di Certain Liabil	iues and I	kelated Data

17. Describe any increase	of decrease in income reasonably anticipated to occur	within the year following the filling of this document.
None		

B6J (Officia CE38® 619 (72/81 0	Doc 1	Filed 07/06/09	Entered 07/06/09 16:49:30	Desc Main
		Document	Page 23 of 55	

B6J (Official Description Doc 1 Filed 07/06/09 Entered 07/06/09 16:4 Document Page 23 of 55	9:30 Desc Main
In re James Bradley Garrison Case No.	
Debtor (if	known)
	UAL DEDECOD(C)
SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDU	UAL DEBIOR(S)
Complete this schedule by estimating the average or projected monthly expenses of the debtor and t filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.	
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a labeled "Spouse."	a separate schedule of expenditures
1. Rent or home mortgage payment (include lot rented for mobile home)	\$0.00
a. Are real estate taxes included? Yes No	
b. Is property insurance included? Yes No	
2. Utilities: a. Electricity and heating fuel	\$0.00_
b. Water and sewer	\$
c. Telephone	\$85.00_
d. Other	\$0.00_
3. Home maintenance (repairs and upkeep)	\$0.00_
4. Food	\$400.00_
5. Clothing	\$80.00_
6. Laundry and dry cleaning	\$20.00_
7. Medical and dental expenses	\$60.00_
8. Transportation (not including car payments)	\$250.00_
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$125.00_
10.Charitable contributions	\$0.00_
11.Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$0.00_
b. Life	\$0.00_
c. Health	\$78.00_
d.Auto	\$140.00_
e. Other	\$0.00_
12.Taxes (not deducted from wages or included in home mortgage payments)	
(Specify)	\$0.00_
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$0.00_
b. Other	\$0.00_
c. Other	\$0.00_
14. Alimony, maintenance, and support paid to others	\$0.00_
15. Payments for support of additional dependents not living at your home	\$0.00_
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$0.00_
17. Other Restaurant; hair; personal prescript	\$124.00_
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$ 1.362.00

if applicable, on the Statistical Summary of Certain Liabilities and Related Data) None

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

	None
-	

20. STATEMENT OF MONTHLY NET INCOME

a. Average monthly income from Line 15 of Schedule I	\$ 1,360.62
b. Average monthly expenses from Line 18 above	\$ 1,362.00
c. Monthly net income (a. minus b.)	\$ -1.38

1,362.00

Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court

Northern District of Illinois

In re	James Bradley Garrison	Cas			ase No.	
	De	btor				
				Chapter	7	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 0.00		
B – Personal Property	YES	3	\$ 3,213.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	5		\$ 55,313.08	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 1,360.62
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 1,362.00
TOTAL		17	\$ 3,213.00	\$ 55,313.08	

Official Form 19-5284 Symmetry (FAME) 07/06/09 Entered 07/06/09 16:49:30 Desc Main United States Baikraptes Court Northern District of Illinois

In re	James Bradley Garrison	Case No.			
	Debtor				
		Chapter	7		

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	0.00

State the Following:

9	
Average Income (from Schedule I, Line 16)	\$ 1,360.62
Average Expenses (from Schedule J, Line 18)	\$ 1,362.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 748.91

State the Following:

State the Following.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 55,313.08
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 55,313.08

Debtor

Document

B6 (Official 16:49:30 Desc Main

(If known)

Bankruptcy2009 @1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

Page 26 of 55 James Bradley Garrison In re Case No.

D T C T	D / DTO 1 /	10110TE	ADIA AATT	TT TT

	ENALTY OF PERJURY BY INDIVIDUAL DEBTOR
I declare under penalty of perjury that I have read the are true and correct to the best of my knowledge, information,	e foregoing summary and schedules, consisting of sheets, and that they and belief.
DateJuly 1, 2009	Signature:/s/ James Bradley Garrison
Date	Debtor:
	Not Applicable
Date	Signature: Not Applicable (Joint Debtor, if any)
	[If joint case, both spouses must sign.]
	TORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
compensation and have provided the debtor with a copy of this de 110(h) and 342(b); and, (3) if rules or guidelines have been prom	repetition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for ocument and the notices and information required under 11 U.S.C. §§ 110(b), sulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable of the maximum amount before preparing any document for filing for a debtor or
Printed or Typed Name and Title, if any,	Social Security No. (Required by 11 U.S.C. § 110.)
of Bankruptcy Petition Preparer If the bankruptcy petition preparer is not an individual state the name title ((Required by 11 0.5.C. § 110.) (if any), address, and social security number of the officer, principal, responsible person, or partner
who signs this document.	y arry, adaress, and social security number of the officer, principal, responsible person, or parties
	
Address	
X	
Signature of Bankruptcy Petition Preparer	Date
Names and Social Security numbers of all other individuals who prepared or a	ssisted in preparing this document, unless the bankruptcy petition preparer is not an individual:
If more than one person prepared this document, attach additional signed she	ets conforming to the appropriate Official Form for each person.
A bankruptcy petition preparer's failure to comply with the provisions of title 11 and 18 U.S.C. § 156.	d the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110
DECLARATION UNDER PENALTY OF PERJ	URY ON BEHALF OF A CORPORATION OR PARTNERSHIP
	ent or other officer or an authorized agent of the corporation or a member
	[corporation or partnership] named as debtor
shown on summary page plus 1), and that they are true and correct	foregoing summary and schedules, consisting ofsheets (total t to the best of my knowledge, information, and belief.
Date	Signature:
	[Print or type name of individual signing on behalf of debtor.]
[An individual signing on behalf of a partnershin	or corporation must indicate position or relationship to debtor.]

Case 09-72810

Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In Re Jai	James Bradley Garrison	Case No.
	•	(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or selfemployed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	AMOUNT	SOURCE
2009	3,355.75	
2008	6,012.00	
2007	4.302.00	

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2008 1,486.00 Map Grant

2007 5,244.00 Unemployment and Map Grant

None

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

NAME AND ADDRESS OF

PERSON FOR WHOSE BENEFIT

PROPERTY WAS SEIZED

None \boxtimes c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) NAME AND ADDRESS OF CREDITOR DATES OF AMOUNT PAID AMOUNT STILL AND RELATIONSHIP TO DEBTOR **PAYMENTS OWING** 4. Suits and administrative proceedings, executions, garnishments and attachments None List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) **CAPTION OF SUIT** NATURE OF PROCEEDING COURT OR STATUS OR AND CASE NUMBER AGENCY AND LOCATION DISPOSITION GE Money Bank Collection Winnebago county Judgment entered James Garrison 09 SC 346 Rockford Memorial Collection Winnebago County Judgment entered Hospital v. James Garrison 07 AR 579 None Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter M 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

SEIZURE

DESCRIPTION AND

VALUE OF PROPERTY

Repossessions, foreclosures and returns

None M

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and Receiverships

None \boxtimes

Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND **ADDRESS** OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None \square

List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND **ADDRESS** OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY DATE OF **GIFT**

DESCRIPTION AND VALUE OF GIFT

Anna Carlson Girlfriend 12-25-08 Camera 1324 Camp Street \$250.00

Rockford, IL

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Brian K. Larkin One Court Place- Suite 301 Rockford, IL 61101 03-31-09 \$800.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

 \boxtimes

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND DESCRIPTION AND ADDRESS OF OWNER VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE

ENVIRONMENTAL LAW

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 34 of 55

List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice. None \boxtimes SITE NAME NAME AND ADDRESS DATE OF **ENVIRONMENTAL** AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit None that is or was a party to the proceeding, and the docket number. X NAME AND ADDRESS DOCKET NUMBER STATUS OR DISPOSITION OF GOVERNMENTAL UNIT 18. Nature, location and name of business None If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case. If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case. If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case. **NAME** LAST FOUR DIGITS OF **ADDRESS** NATURE OF BUSINESS BEGINNING AND SOCIAL-SECURITY OR **ENDING DATES** OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN James Garrison 476 Althea Street Handyman Work 04-01-09 to Machesney Park, IL present 61115 Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101. None

ADDRESS

Bankruptcy2009 ©1991-2009, New Hope Software, Inc., ver. 4.4.9-735 - 30564 - Adobe PDF

M

NAME

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 35 of 55

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, record and financial statements

None

a. List all bookkeepers and accountants who within the two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the two years immediately preceding the commencement of this case by the debtor.

NAME AND ADDRESS

DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 36 of 55

List the name and address of the person having possession of the records of each of the two inventories

DATE OF INVENTORY NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS 21. Current Partners, Officers, Directors and Shareholders None If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership. X NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST None If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation. \boxtimes NAME AND ADDRESS TITLE NATURE AND PERCENTAGE OF STOCK OWNERSHIP 22. Former partners, officers, directors and shareholders None If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case. \boxtimes DATE OF WITHDRAWAL **NAME ADDRESS** None If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case. M DATE OF TERMINATION TITLE NAME AND ADDRESS

23. Withdrawals from a partnership or distribution by a corporation

perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

If the debtor is a partnership or a corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

None

M

None

 \boxtimes

reported in a., above.

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 37 of 55

24. Tax Consolidation Group

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date

July 1, 2009

Signature of Debtor

/s/ James Bradley Garrison

JAMES BRADLEY GARRISON

<u>~</u>
چ
0
7
3
⋖.
4
30564
33
٧.
-
-4
\vdash
e
ver.
*
ci.
_
vare
Ę
0
\mathbf{v}
Ð
8
ad
0
0
0
0
0
0
ew Ho
0
ew Ho
, New Ho
9, New Ho
9, New Ho
9, New Ho
009, New Ho
009, New Ho
9, New Ho
2009, New Ho
1-2009, New Ho
91-2009, New Ho
91-2009, New Ho
1-2009, New Ho
1991-2009, New Ho
1991-2009, New Ho
91-2009, New Ho
@1991-2009, New Ho
@1991-2009, New Ho
@1991-2009, New Ho
@1991-2009, New Ho
009 @1991-2009, New Ho
009 @1991-2009, New Ho
009 @1991-2009, New Ho
009 @1991-2009, New Ho
009 @1991-2009, New Ho
cy2009 @1991-2009, New Ho
009 @1991-2009, New Ho
ptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
ptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho
uptcy2009 @1991-2009, New Ho

ĎΕ

0__ continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. \$152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer		Social Security No. (Required by 11 U.S.C. § 110(c).
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible perspartner who signs this document.		
Address		
X Signature of Rankruptov Patition Pranarar		 Date
Signature of Bankruptcy Petition Preparer		Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 39 of 55

B8 (Official Form 8) (12/08)

UNITED STATES BANKRUPTCY COURT Northern District of Illinois

Garrison		

	James Bradley Garrison			
In re			Case No.	
111 10	Debtor	,	Cuse 110.	Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Donat No. 1	7
Property No. 1 NO SECURED PROPERTY Creditor's Name:	Describe Property Securing Debt:
Property will be (check one):	
☐ Surrendered ☐ Retained	
If retaining the property, I intend to (check at least one):	
☐ Redeem the property	
Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	
Property is (check one):	
	Not claimed as exempt
	٦
Property No. 2 (if necessary)	
Creditor's Name:	Describe Property Securing Debt:
Property will be (check one):	
☐ Surrendered ☐ Retained	
If retaining the property, I intend to (check at least one):	
Redeem the property	
Reaffirm the debt	
Other. Explain	(for example, avoid lien
using 11 U.S.C. §522(f)).	
Property is (check one): Claimed as exempt	Not claimed as exempt
Claimed as exempt	Not claimed as exempt

Case 09-72810 Doc 1 Filed 07/06/09

Document

Entered 07/06/09 16:49:30 Page 40 of 55

Desc Main

B8 (Official Form 8) (12/08)

Page 2

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)

Property No. 1 NO Leased Property		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
Property No. 2 (if necessary)	\neg	
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
ocontinuation sheets attached (if an a declare under penalty of perjury that Estate securing debt and/or personal processing the security of personal processing debt and/or personal pro	the above indicates my intention as to	
1.1.2000	// James Burdle C	
Date: July 1, 2009	/s/ James Bradley G	parrison
	Signature of Debtor	
	Signature of Joint Debt	or

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Desc Magie 2 Document Page 42 of 55

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor

Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security
X	number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social	
Security number is provided above.	

Cer	tificate	of the	Debtor
Cer	uncate	or the	Dentor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

James Bradley Garrison	X/s/ James Bradley Garrison July 1, 2009
Printed Name(s) of Debtor(s)	Signature of Debtor Date
Case No. (if known)	X
, , , , , , , , , , , , , , , , , , , ,	Signature of Joint Debtor (if any) Date

Bank of America c/o Associated Recovery Systems P.O. Box 469046 Escondido, CA 92046-9045

Beloit Clinic 1905 Huebbe Parkway Beloit, WI 53511

Beloit Clinic c/o United Credit 15 N. Lincoln Elkhorn, WI 53121

Creditors Protection S 202 W State St Ste 300 Rockford, IL 61101

Discover Fin Svcs c/o Focus Receivables Management 1130 Northchase Parkway, Suite 150 Marietta, GA 30067

Fort Medical Group c/o Margraf Collectn Agenc 112 N Main St Fort Atkinson, WI 53538

GE Money 40 Meyer & NJUS 134 N. LaSalle Street, Suite 1840 Chicago, IL 60602

Gemb/american Honda Po Box 981439 El Paso, TX 79998

Hertz Rental Car 2 Airport Circle Rockford, IL 61109

Members Alliance Credit Union 2550 S. Alpine Road Rockford, IL 61108 Orthopedic Associates c/o Creditors Protection S 202 W State St Ste 300 Rockford, IL 61101

OSF Lifeline Ambulance, LLC c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108

Rockford E.A.S. c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108

Rockford Health Physicians c/o Creditors Protection S 202 W State St Ste 300 Rockford, IL 61101

Rockford Health System c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108

Rockford Health System c/o Rockford Mercantile 2502 S Alpine Rd Rockford, IL 61108

Rockford Health Systems c/o Aba 300 1/2 South 2nd Clinton, IA 52733

Rockford Health Systems c/o Aba 300 1/2 South 2nd Clinton, IA 52733

Rockford Health Systems c/o Aba 300 1/2 South 2nd Clinton, IA 52733 Roscoe Physical Therapy c/o Account Receivable Management 7834 N. Second Street, Unit 5 Machesney Park, IL 61115

Swedish American Health c/o Creditors Protection Service 202 West State Street, Ste. 300 Rockford, IL 61101

US Bank National Association c/o Frank S. Falzone & Associates 5140 Main Street, Suite 3003-324 Williamsville, NY 14221 Case 09-72810 Doc 1 Filed 07/06/09 Entered 07/06/09 16:49:30 Desc Main Document Page 46 of 55

B203 12/94

United States Bankruptcy Court Northern District of Illinois

	In re James Bradley Garrison	Case No.	
		Chapter	7
	Debtor(s)		
	DISCLOSURE OF COMPENSATION O	OF ATTORNEY FOR D	EBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert and that compensation paid to me within one year before the filing rendered or to be rendered on behalf of the debtor(s) in contemp	g of the petition in bankruptcy,	or agreed to be paid to me, for services
	For legal services, I have agreed to accept	\$\$	00.00
	Prior to the filing of this statement I have received	\$8	00.00
	Balance Due	\$	0.00
2.	The source of compensation paid to me was:		
	☑ Debtor ☐ Other (specify)		
3.	The source of compensation to be paid to me is:		
	☑ Debtor ☐ Other (specify)		
4. assc	I have not agreed to share the above-disclosed compensation ociates of my law firm.	on with any other person unle	ss they are members and
of m	I have agreed to share the above-disclosed compensation way law firm. A copy of the agreement, together with a list of the nan		
5.	In return for the above-disclosed fee, I have agreed to render leg	gal service for all aspects of th	e bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advib. Preparation and filing of any petition, schedules, statements of c. Representation of the debtor at the meeting of creditors and of	of affairs and plan which may	pe required;
6.	By agreement with the debtor(s), the above-disclosed fee does	not include the following conv	inan
0.	by agreement with the debtor(s), the above-disclosed fee does	not include the following serv	ices.
	CE	RTIFICATION	
	I certify that the foregoing is a complete statement of any debtor(s) in the bankruptcy proceeding.	agreement or arrangement fo	r payment to me for representation of the
	July 1, 2009	/s/ Brian K. Larkin	
	Date		nture of Attorney
	I	Name	e of law firm

	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
In re James Bradley Garrison	☐ The presumption arises.
Debtor(s)	
Case Number:	☐ The presumption is temporarily inapplicable.
(If known)	

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	s, each joint filer must complete a separate statement.
	Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS
1A	If you are a disabled veteran described in the Veteran's Declaration in this Part IA, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
1C	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard a. User scaled to active duty after September 11, 2001, for a period of at least 90 days and
	☐ I remain on active duty /or/ ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; OR b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/ ☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

	Par	t II. CALCULATION OF MONTHLY II	NCOME FOR § 707(b)	7) I	EXCLUS	ION
	Marita	al/filing status. Check the box that applies and comp	olete the balance of this part of the	s sta	atement as	directed.
	а. 🚺 С	Unmarried. Complete only Column A ("Debtor's Ir	ncome") for Lines 3-11.			
	penalty living a	Married, not filing jointly, with declaration of separate y of perjury: "My spouse and I are legally separated upart other than for the purpose of evading the requirulete only Column A ("Debtor's Income") for Line	inder applicable non-bankruptcy la ements of § 707(b)(2)(A) of the B	w o	r my spous	e and I are
2		Married, not filing jointly, without the declaration of s in A ("Debtor's Income") and Column B ("Spous		2.b	above. Co	mplete both
	d. for Lin	Married, filing jointly. Complete both Column A ("nes 3-11.	Debtor's Income") and Columr	В (("Spouse's	Income")
	six cale before	ares must reflect average monthly income received from the months prior to filing the bankruptcy case, end the filing. If the amount of monthly income varied duthe six-month total by six, and enter the result on the	ing on the last day of the month uring the six months, you must	1	column A Debtor's Income	Column B Spouse's Income
3	Gross	wages, salary, tips, bonuses, overtime, commis	sions.	\$	748.91	\$ N.A.
4	Line a than or attachr	ne from the operation of a business, profession of and enter the difference in the appropriate column(s) ne business, profession or farm, enter aggregate number. Do not enter a number less than zero. Do not ess expenses entered on Line b as a deduction in	of Line 4. If you operate more obers and provide details on an tinclude any part of the			
	a.	Gross receipts	\$ 0.00			
	b.	Ordinary and necessary business expenses	\$ 0.00			
	C.	Business income	Subtract Line b from Line a	\$	0.00	\$ N.A.
5	differe	and other real property income. Subtract Line b fr nce in the appropriate column(s) of Line 5. Do not er clude any part of the operating expenses entere 1.	nter a number less than zero. Do			
J	a.	Gross receipts	\$ 0.00			
	b.	Ordinary and necessary operating expenses	\$ 0.00			
	C.	Rent and other real property income	Subtract Line b from Line a	\$	0.00	\$ N.A.
6	Intere	st, dividends and royalties.		\$	0.00	\$ N.A.
7	Pensio	on and retirement income.		\$	0.00	\$ N.A.
8	expens	mounts paid by another person or entity, on a reses of the debtor or the debtor's dependents, incurpose. Do not include alimony or separate maintentry spouse if Column B is completed.	cluding child support paid for	\$	0.00	\$ N.A.
9	Unemp Howeve was a b	ployment compensation. Enter the amount in the a er, if you contend that unemployment compensation repensit under the Social Security Act, do not list the air A or B, but instead state the amount in the space be	received by you or your spouse mount of such compensation in		0.00	N.A.
		ployment compensation claimed to be efit under the Social Security Act Debtor \$	0.00 Spouse \$N.A.	\$	0.00	\$ N.A.

10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. a. \$ 0.00 b. \$ 0.00				
	Total and enter on Line 10	\$	0.00	\$	N.A.
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$	748.91	\$	N.A.
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$			748.91
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	N			
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 b number 12 and enter the result.	y th	ie \$		8,986.92
14	Applicable median family income. Enter the median family income for the applicable state household size. (This information is available by family size at www.usdoj.gov/ust/ or from the the bankruptcy court.) a. Enter debtor's state of residence: Illinois b. Enter debtor's household size: 1	e cle			47,355.00
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.		•		
15	The amount on Line 13 is less than or equal to the amount on Line 14. Check the not arise" box at the top of page 1 of this statement, and complete Part VIII; do not com				
	The amount on Line 13 is more than the amount on Line 14. Complete the remains	ning	parts of t	his	statement.

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

	Р	art IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b) (2)
16	Ente	r the amount from Line 12.	\$	N.A.
17	listed debte incorr debte list a a. b. c.	tal adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the or or the debtor's dependents. Specify in the lines below the basis for excluding the Column B ne (such as payment of the spouse's tax liability or the spouse's support of persons other than the or or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. \$ \$ \$ and enter on Line 17.	\$	N.A.
18	Curr	ent monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	N.A.
		Part V. CALCULATION OF DEDUCTIONS FROM INCOME		
	Sub	part A: Deductions under Standards of the Internal Revenue Servi	ce (I	RS)
19A	Natio	onal Standards: food, clothing and items. Enter in Line 19A the "Total" amount from IRS nal Standards for Food, Clothing and Other Items for the applicable household size. (This mation is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$	N.A.

19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years or older. (The total number of household members must be the same as the number stated in Line 14b). Multiply line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.								
	Hou	sehold members under 65	years of age	Hous	ehold memb	ers 65 years of age	or older		
	a1.	Allowance per member	N.A.	a2.	Allowance p	er member	N.A.		
	b1.	Number of members	N.A.	b2.	Number of	members			
	c1.	Subtotal	N.A.	c2.	Subtotal		N.A.	\$	N.A.
20A	IRS H	I Standards: housing are ousing and Utilities Standard This information is available	ds; non-mortgage	e exper	nses for the ap	plicable county and h	ousehold		N.A.
20B	the an house court) as sta	Standards: housing armount of the IRS Housing an hold size (this information is; enter on Line b the total of ted in Line 42; subtract Line nt less than zero.	d Utilities Standa available at <u>www</u> the Average Mo b from Line a ar	irds; m w.usdo nthly P nd ente	ortgage/rent e j.gov/ust/ or fi ayments for ai r the result in	expense for your cour rom the clerk of the b ny debts secured by y Line 20B. Do not en	aty and eankruptcy your home, eter an		
	a.	IRS Housing and Utilities St			-	\$	N.A.		
	b.	Average Monthly Payment your home, if any, as state		cured b	ру	\$	N.A.		
	c.	Net mortgage/rental exper	nse			Subtract Line b from	Line a	\$	N.A.
21	out in the IR	Standards: housing ar Lines 20A and 20B does not S Housing and Utilities Stand d, and state the basis for yo	t accurately comp dards, enter any	oute the	e allowance to onal amount to	which you are entitle	d under	\$	N.A.
					,			 	N.A.
22A	You are operated the control o	u checked 0, enter on Line 2 sportation. If you checked 1 local Standards: Transportat opolitan Statistical Area or Co	owance in this ca of whether you which you pay the bution to your ho 2A the "Public Tr or 2 or more, er ion for the applicensus Region. (T	tegory use pu ne oper ouseho canspor ter on cable no	regardless of blic transportarating expense ld expenses in tation" amoun Line 22A the "umber of vehic	whether you pay the oution. The ses or for which the operatine 8. The ses or for which the operating Local Stand Coperating Costs" amount of the applicable of the ses of the se	expenses of erating adards: ount from		
	OF Tro	om the clerk of the bankrupt	cy court.)					\$	N.A.
22B	If you that you 22B th	Standards: transporta pay the operating expenses ou are entitled to an addition he "Public Transportation" and tole at www.usdoj.gov/ust/ o	for a vehicle and nal deduction for nount from IRS L	d also u your p ocal St	use public tran ublic transport tandards: Tran	sportation, and you c tation expenses, ente sportation. (This am	r on Line	\$	N.A.

	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)		
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Transportation Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.		
	a. IRS Transportation Standards, Ownership Costs \$ N.A.		
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 N.A.		
	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.		N.A.
	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.		
24	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.		
24	a. IRS Transportation Standards, Ownership Costs \$ N.A.		
	b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 \$ N.A.		
	c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a.	\$	N.A.
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.	\$	N.A.
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.	\$	N.A.
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance.	\$	N.A.
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.	\$	N.A.
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	\$	N.A.
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.	\$	N.A.
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.	\$	N.A.
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	\$	N.A.
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32	\$	N.A.
		1	_ ,,,, ,,

Total and enter on Line 34. If you do not actually expend this total amount, state your actual average expenditures in the space below: \$ N.A. Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically lil, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expensed for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$131.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expenses. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demons			Subpart B: Additional Expense Note: Do not include any expenses the		2.		
b. Disability Insurance c. Health Savings Account Standard enter on Line 34. If you do not actually expend this total amount, state your actual average expenditures in the space below: SN.A. Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed \$\$\%\$ of those combined allowances. (This information is available at wwww.usdoj.gov/ust/ or from th		monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself,					
Total and enter on Line 34. If you do not actually expend this total amount, state your actual average expenditures in the space below: N.A. Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically Illi, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs Enter the total average monthly amount, in excess of the allowance specified by ISs Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at wwww.usdoj.gov/ust/. or from the clerk of the bankruptcy court.) You must demonstr		a.	Health Insurance	\$ N.A.			
Total and enter on Line 34. If you do not actually expend this total amount, state your actual average expenditures in the space below: N.A. Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expende for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed \$5 of those combined allowances. (This information is available at https://www.usdol.gov/ust/ or from the cl		b.	Disability Insurance	\$ N.A.			
Total and enter on Line 34. If you do not actually expend this total amount, state your actual average expenditures in the space below: \$ N.A. Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically III, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expense for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed 5137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expenses. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at https://www.usdoj.gov/ust/ or from the	34	C.	Health Savings Account	\$ N.A.	ф.	N.A.	
average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. **No** Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed \$% of those combined allowances. (This information is available at yww.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. **Continued charitable contributions.** Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitabl		If y	ou do not actually expend this total amount, stat to below:	e your actual average expenditures in the	•	N.A.	
expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court. Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 (c)(1)-(2)	35	average support	e actual monthly expenses that you will continue to pa of an elderly, chronically ill, or disabled member of yo	y for the reasonable and necessary care and	\$	N.A.	
IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 Note that the services is and you must that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 Note that the services is and you must that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 Note that the services is an interest and you must that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170	36	expens Prevent	es that you actually incurred to maintain the safety of ion and Services Act or other applicable federal law. T	your family under the Family Violence	\$	N.A.	
expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Sontinued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 (c)(1)-(2)	37	IRS Loc	al Standards for Housing and Utilities that you actuall e your case trustee with documentation of your a	y expend for home energy costs. You must actual expenses, and you must	\$	N.A.	
food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 N	38	expens elemen provid why th	es that you actually incur, not to exceed \$137.50 per of tary or secondary school by your dependent children lee your case trustee with documentation of your are the amount claimed is reasonable and necessary are	child, for attendance at a private or public ess than 18 years of age. You must actual expenses and you must explain	\$	N.A.	
the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 (c)(1)-(2) \$ N	39	food an in the I availab	d clothing expenses exceed the combined allowances RS National Standards, not to exceed 5% of those corle at www.usdoj.gov/ust/ or from the clerk of the bank	for food and clothing (apparel and services) nbined allowances. (This information is kruptcy court.) You must demonstrate	\$	N.A.	
Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40. \$	40	the form	m of cash or financial instruments to a charitable orga		\$	N.A.	
	41	Total	Additional Expense Deductions under § 707	(b). Enter the total of Lines 34 through 40.	\$	N.A.	

		Subp	art C: Deductions for De	bt P	ayment		
	pr Av Mo m	operty that you own, list the name verage Monthly Payment, and che conthly Payment is the total of all a conths following the filing of the baseparate page. Enter the total Av	e of creditor, identify the propert ck whether the payment includes amounts contractually due to eacl ankruptcy case, divided by 60. If	y secu taxes n Secu neces	uring the debi s or insurance ured Creditor	t, and state the t. The Average in the 60	
42		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance?	
	a.			\$		☐ yes ☐ no	
	b.			\$		☐ yes ☐ no	
	C.			\$		☐ yes ☐ no	
				1	nl: Add Line and c		\$ N.A.
	prim depe pay prop repo	er payments on secured classifier residence, a motor vehicle, or endents, you may include in your of the creditor in addition to the paymenty. The cure amount would inclussession or foreclosure. List and total entries on a separate page.	other property necessary for you deduction 1/60th of any amount ments listed in Line 42, in order t ude any sums in default that mus otal any such amounts in the follo	ur sup (the " to ma t be p	oport or the sucure amount" intain possessoaid in order t	upport of your) that you must sion of the o avoid	
43		Name of Creditor	Property Securing the Debt		1/60th of th	ne Cure Amount	
	a.				\$		
	b.				\$		
	C.				\$		
							\$ N.A.
44	clair	ments on prepetition prior ms, such as priority tax, child supp r bankruptcy filing. Do not include	port and alimony claims, for which	h you	were liable a	t the time of	\$ N.A.
	the 1	upter 13 administrative exp following chart, multiply the amouinistrative expense.					
	a.	Projected average monthly	Chapter 13 plan payment.		\$	N.A.	
45	b.	schedules issued by the Exe	district as determined under ecutive Office for United States is available at www.usdoj.gov/uskruptcy court.)		x	N.A.	
	c.	Average monthly administra	ative expense of Chapter 13 case		Total: Multip	y Lines a and b	\$ N.A.
46	Tot	al Deductions for Debt Pay	ment. Enter the total of Lines 4	2 thro	ough 45.		N.A.
		-	art D: Total Deductions f		<u> </u>		\$ 11.Л.
47	Tot	al of all deductions allowed				41 and 46	NT 4
7,		a. J. ali acaactions anower	2 4 14Cl 3 707 (D)(2). Liller t		ai oi Lilies 33	, +1, and 40.	\$ N.A.

48	Part VI. DETERMINATION OF § 707(b)(2) PRES Enter the amount from Line 18 (Current monthly income for § 707(b)(2)		\$	N.A.
49	Enter the amount from Line 47 (Total of all deductions allowed under §		\$ \$	N.A.
	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48		Ψ	IV.A.
50	result.	and ontor the	\$	N.A.
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 9 number 60 and enter the result.	50 by the	\$	N.A.
	Initial presumption determination. Check the applicable box and proceed as direct	ed.		
	The amount on Line 51 is less than \$6,575. Check the box for "The presump page 1 of this statement, and complete the verification in Part VIII. Do not complete the			e top of
52	The amount set forth on Line 51 is more than \$10,950. Check the "Presur page 1 of this statement, and complete the verification in Part VIII. You may also compute the remainder of Part VI.			
	The amount on Line 51 is at least \$6,575, but not more than \$10,950. VI (Lines 53 through 55).	Complete the re	emainder	of Part
53	Enter the amount of your total non-priority unsecured debt		\$	N.A.
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0 enter	.25 and	\$	N.A.
	Secondary presumption determination. Check the applicable box and proceed as	directed.		
55	 ☐ The amount on Line 51 is less than the amount on Line 54. Check the bo not arise" at the top of page 1 of this statement, and complete the verification in Part V ☐ The amount on Line 51 is equal to or greater than the amount on Line presumption arises" at the top of page 1 of this statement, and complete the verification complete Part VII. 	III. 54. Check the b	oox for "	Γhe
	Part VII: ADDITIONAL EXPENSE CLAIM	S		
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this health and welfare of you and your family and that you contend should be an additional de income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate pag average monthly expense for each item. Total the expenses.	duction from you	ır curren	t monthly
56	Expense Description	Monthly A	mount	
50	a.	\$	N.A.	
	b.	\$	N.A.	
	C	\$	N.A.	
	Total: Add Lines a, b and c		N.A.	
	Part VIII: VERIFICATION			
	I declare under penalty of perjury that the information provided in this statement is true are both debtors must sign.)		is a joint	case,
57	Date: July 1, 2009 Signature: /s/ James Bradley Garriso (Debtor)	n		
37	Date: Signature:(Joint Debtor, if any)			

Income Month 1			Income Month 2		
Gross wages, salary, tips	205.00	0.00	Gross wages, salary, tips	319.00	0.
Income from business	0.00	0.00	Income from business	0.00	0.
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.
Unemployment	0.00	0.00	Unemployment	0.00	0.
Other Income	0.00	0.00	Other Income	0.00	0.
Income Month 3			Income Month 4		
Gross wages, salary, tips	785.00	0.00	Gross wages, salary, tips	1,013.50	0.
Income from business	0.00	0.00	Income from business	0.00	0.
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.
Unemployment	0.00	0.00	Unemployment	0.00	0.
Other Income	0.00	0.00	Other Income	0.00	0.
Income Month 5			Income Month 6		
Gross wages, salary, tips	1,067.00	0.00	Gross wages, salary, tips	1,104.00	0.
Income from business	0.00	0.00	Income from business	0.00	0.
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.
Unemployment	0.00	0.00	Unemployment	0.00	0.
Other Income	0.00	0.00	Other Income	0.00	0.

Additional Items as Designated, if any

Remarks